

Illinois Adoption Advisory Council
Friday, June 1, 2018
Sheraton Hotel, 3000 Warrenville Rd. Lisle, IL
10:00 a.m. – 3:00 p.m.
APPROVED MINUTES

AAC Members Present	AAC Members Present cont'd	Staff
Kathleen Bush	Mark Werner	Gwenn Eyer
Alice Couch	Jeremy Wheeler	Sylvia Fonseca
Mary Pat Oliver	Julie Yelverton	Michelle Grove
Michelle Price		Vanessa James
Crystal Rekart	AAC Members Absent	Kelly King
Elizabeth Richmond	Natalie Miller	Gail Mayer
Danielle Sanders	Maria Nanos	Maggie Poteau
Brittney Sprouse	Keisha Robinson	
Karen Taylor	Karen Wardlaw	Guests
Danny Tolliver Jr.		Christine Feldman
Amy Trotter		Jeanette Orlove
		Martin Orlove

Welcome and Introductions

Mark Werner, IAAC co-chair, opened the meeting and welcomed Mary Pat Oliver back to the Council.

Correction to Minutes from 04/06/2018 IAAC Meeting

The minutes listed Julie Yelverton in error as seconding the motion to adjourn the meeting held on 04/06/2018. The date of the minutes was also corrected. Danielle Sanders moved to accept the corrections with Michelle Price seconding the motion.

Four Discipline of Execution

Michelle Grove

Michelle presented a video to describe the 4DX approach. The Director is implementing the 4DX approach statewide. The goal is to increase the number of intentional “quality touches” children birth -3 receive, increase the number of “eyes” on the family, and increase the capacities of the adults in the lives of children Birth – 3. The council met to discuss the 4DX framework and identify a Wildly Important Goal to support the Department’s WIG.

Council Discussion

Identifying lead measures and lag measures for prioritizing adoption process were discussed. A lag measure may be the time from TPR to adoption, but how can we influence the time versus the impact of some other entity? Lag measure would be the number of days, the Lead measure would be what we are doing to impact the number of days and that needs to be identified. Conversations with the courts and judges could be a goal to show stats regarding the length of time involved in the adoption process and the timeline from a child’s perspective. Member suggestion to start working on the adoption process when the goal changes to adoption instead of

waiting until TPR. Barriers to adoption completion include cases sitting at court, errors on TPR orders, issues with termination of birth father's rights.

QIC Update/Phone line/Web site Caring and Sharing Training

Christine Feldman and Vanessa James

There is an opportunity for Illinois to be one of eight sites for a pilot project addressing training for foster and adoptive parents. Communication with parents, doctors, school staff, DCFS staff, etc. is needed to bring understanding that adoption is a lifelong process and there is no stigma to seeking services early in the adoption process. Services should be ongoing and accessible to families.

How you communicate to other professionals that many adopted children have special trauma backgrounds is an important aspect of QIC. The Caring and Sharing video is now available on D-Net and the VTC to assist with communicating the special needs of adopted children to other professionals. Please share the information with providers that you are in contact with through your children or profession. Future goals include a video for pre-adoptive and adoptive parents and a web portal for information sharing. Christine reported that QIC may be able to help with resources to aid in communication of the needs of adoptive children.

DCFS staff are working with OITS to create a forum to share information that can include videos and the listing of children available for adoption. There is a process to complete to have the project assigned to a developer and the plan has to be approved. Those interested in being on the project committee should express their interest.

The adoption phone line has been enhanced. The phone line is a voice mail system which will allow callers to leave a detailed voicemail regarding a subsidy question. The system is monitored by clerical staff that will forward the message to the appropriate entity and a call will be returned within 24 hours or on the next business day. The caller can also select that they need to be referred for services within their region. When the service selection is entered, the caller is provided information regarding the service provider in their area and is connected with the provider. In addition to the phone line, a share point site has been created. The type of call, time, county, reason for call and a re-cap of the call can be entered into the share point site. A reminder can also be generated through the share point site to remind a worker to follow up on a specific call or issue. If a different worker needs to address the issue, the call taker can send an email to the worker with a link to the log in the share point application. Vanessa James shared the example of a clerical taking the voice mail message that the caller needed to have a name corrected. The clerical staff took the information and then handed the call off to the post adoption worker via the share point application. The post adoption worker logged their contact with the caller and the instructions of how to address the name change and closed the call. There will need to be marketing and internal instruction to have callers start using the toll-free number instead of calling the post adoption worker on their direct line.

Council discussion: The phone number and how it will work needs to be "blasted" statewide and be included in the newsletter to make people aware. Council members liked the fact that the program will provide reminders for workers to address issues and that it will track calls and how

they are handled. Since many families know the direct number to their post adoption worker, it will require communication with families to encourage them to use the toll-free number so that tracking and data collection can occur. Post adoption staff can still enter the information received from direct calls into the share point application. It was suggested that the phone number and web site address (once live) be printed on something business card size so that it can be handed out at meetings and trainings.

Adoption Contracts and Services for FY 19

Kelly King

There were no major cuts to adoption contracts or services. There were some small increases approved. Baby Fold has been approved to serve the Peoria area. Services will be home based. At this time, they have ½ worker they can make available for the Peoria area. The service will not commence until July 1, 2018. There is a waiting list of 40-50 so it is anticipated that additional staff will be needed.

The Virtual Training Center (VTC) is an external web site that providers (educational, medical, child welfare, etc.) can access for training. The Caring and Sharing Training is available in the public content section.

Center for Law and Social Work

Danielle Sanders

There are currently 33 children on the website that available for adoption. Center for Law and Social work is trying to develop a tracking system for child a time is listed on the site. There have been 400 general inquiries and 70 licensing inquiries due to visits to the website. The number of children served hovers at around 90 per fiscal year. There is current recruitment for specialized foster homes. Two cases were recently closed due to adoption proceeding. Sylvia Fonseca stated that part of the training across the state is that children are to be referred for listing if the fostering family is unwilling to commit to permanency. For some families, their heart is in fostering and supporting transition to a permanent home rather than pursuing adoption themselves. The database identifies when the goal has changed and there is monitoring to determine if the child is being put on the listing if the placement is unwilling to commit to permanency. This rolled out May 1, 2018 and the Department is still working to acclimate staff to the process. Administration and supervisors will receive alerts regarding the need to list the child. The concern that placements out of state were not being pursued was raised. Barriers to placing out of state include the need for the home in the other state to be licensed, the adoption would have to follow the rules/guidelines of the Interstate Compact, children and workers may object to out of state placement when siblings or other family members remain in the home state. The children also have the right to refuse out of state placement after reaching the age of 14.

Managed Care

Maggie Poteau

The change to managed care, Illini Care, will affect parents, caregivers, children across all systems. The roll out is still ongoing with the goal to go live on October 1, 2018. This change will impact youth in care and former youth in care. Youth in care will transition to Illini Care on October 1 and new cards and identification numbers will be issued. The Child Welfare Medicaid Managed Care Implementation Advisory Council will focus on the implementation phase. Staff from HFS and DCFS will chair the Council. Birth, adoptive, foster parents, child welfare staff (DCFS and private agency), judicial staff, and others are being sought for membership on the Council. The Council will have regional meetings with meetings set in the Cook, Northern,

Central, and Southern regions. The boards will meet in the region and will be open to the public. The term for service on the Council is 2 years and the statute specifies that the Council should be in operation for a minimum of 5 years. Meetings will be in person but participation via conference call can be arranged if necessary. Those interested in serving should let Michelle Grove or Gail Mayer know of the interest.

Council discussion: caregivers need to know who to contact if they have problems with medical services, guidelines for choosing the right managed care provider for post adoption/guardianship families, suggestions that information could be shared via flyers attached to the medical card, at ACR meetings, via Facebook postings and through social media avenues such as Twitter and Instagram for former youth in care. Families have a lot of anxiety about the move to managed care because there have been negative reports regarding coverage provided by Illini Care. Northern region council members report very few providers in the region are accepting Illini Care. Concern regarding the number of Mental Health providers accepting Illini Care was also raised by Council Members. Maggie states that coverage issues are being addresses for both medical and mental health services and will have to meet a certain saturation level prior to the contract being finalized.

Alice Couch moved to adjourn the meeting; Danny Tolliver seconded and the motion for adjournment carried.

NEXT MEETING: Conference Call: Friday, July27, 2018, 10 a.m. - Noon.